STUDENT EMPLOYEE PERFORMANCE EVALUATION

Student Name	ID#	Class Year	
Job Title	Dept	Supervisor	
Period Covered by Evaluation: fro	om/to/	<u>′</u> .	
PART I – STUDENT SELF EV	ALUATION (To be completed by	y student prior to meeting with supe	rvisor)
1. List the skills, knowledge	, and abilities learned or enhanced	in this position. If possible, provid	le examples.
2. Describe the strengths tha	t you bring to the workplace.		
3. Describe any challenges i	n this position that you have maste	ered or tackled.	
4. Describe any challenges i	n this position you are currently fa	acing.	
5. Please offer any suggestion	ons for change that could enhance	the workplace for both the population	on served and the
employee(s).			

	Student Employee Evaluation for(student name)									
PART II – SUPERVISOR EV	ALUATION	(To be completed	by supe	rvisor a	ınd sl	nare	d wi	th stude:	nt during r	neeting)
Review the current job descripti and submitted to the Student En			eeded. A	Any cha	nges	sho	uld	be attach	ed to the	evaluation
Circle the appropriate number that best	describes the stu	dent's performance in	the catego	ories liste	d belo	w ba	sed o	n the follo	wing scale:	
1-Unsatisfactory	2- Good	3-Very Good		4-Outstanding						
Service Oriented - pleasant, in	terested, enthu	siastic, attentive		NA	1	2	3	4		
Initiative -self-starter, does work on own				NA	1	2	3	4		
Creativity - has new ideas, finds new approaches to problems				NA	1	2	3	4		
Mastery of Job Skills – exhibited necessary skills				NA	1	2	3	4		
Cooperation - works well with others, willing to do own part				NA	1	2	3	4		
Dependability - reliable, trustworthy, conscientious				NA	1	2	3	4		
Attendance – punctual, reliable				NA	1	2	3	4		
Efficiency – accurate, thorough, completes tasks				NA	1	2	3	4		
Productivity - produces desired quantity of work				NA	1	2	3	4		
Care of Materials and Equipment - careful, not wasteful				NA	1	2	3	4		
Additional Comments:										
		//								/
Supervisor's Signature		Date	Student's Signature Date							
Please Note: Signatures indicat contact the Student Employmen.			ead and	discuss	ed. Ij	f the	re is	s an unre	solved iss	ue, please
PART III – RELEASE AND	WAIVER									
Your signature below authorize information regarding your on of department supervisors at Midd	ampus emplo	yment in the posit								

Student's Signature